

**FEC
FORM 3**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER
2005 AUG 16 A 9:56
Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

DEBORAH FOR CONGRESS

ADDRESS (number and street)

7645 SENTRY OAK CIRCLE EAST



Check if different
than previously
reported. (ACC)

JACKSONVILLE FL 32256-2323

2. FEC IDENTIFICATION NUMBER ▼

C00346767

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS
REPORT



NEW
(N)

OR



AMENDED
(A)

FL

04

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the
State of

FL

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

in the
State of

FL

5. Covering Period

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

through

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

DEBORAH KATZ PUESCHEL

Signature of Treasurer

Deborah Katz Pueschel

Date

MM/DD/YYYY

MM/DD/YYYY

MM/DD/YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3
(Revised 02/2003)

FESAND18

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